

032404

| | | |
|---|--|---|
| UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> | | Attorney Docket No. 250813US2 |
| | | First Inventor or Application Identifier Yutaka OTA |
| Title COMPILER, METHOD OF COMPILED AND PROGRAM DEVELOPMENT TOOL | | |

| | | |
|--|---|---|
| APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small> | | ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> | | ACCOMPANYING APPLICATION PARTS |
| 2. <input checked="" type="checkbox"/> Specification | Total Sheets 40 | 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) | Total Sheets 18 | 8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 |
| 4. <input type="checkbox"/> Oath or Declaration | Total Pages | 9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <small>(when there is an assignee)</small> <input type="checkbox"/> Power of Attorney |
| a. <input type="checkbox"/> Newly executed (original or copy) | | 10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> |
| b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 17 completed)</small> | | 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations (1) |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S) | | 12. <input type="checkbox"/> Preliminary Amendment |
| Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b). | | 13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard |
| 5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | | 14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (1) <small>(if foreign priority is claimed)</small> |
| 6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> | | 15. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small> |
| a. <input type="checkbox"/> Computer Readable Form (CRF) | | 16. <input checked="" type="checkbox"/> Other: Request for Priority, Statement of Relevancy |
| b. Specification or Sequence Listing on : | | |
| i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or | | |
| ii. <input type="checkbox"/> Paper | | |
| c. <input type="checkbox"/> Statements verifying identity of above copies | | |

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

Continuation Divisional Continuation-in-part (CIP) of prior application no.:

Prior application information: Examiner: Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

Customer Number

22850

(703) 413-3000

FACSIMILE: (703) 413-2220

| | |
|--|--------------------------|
| Name: Marvin J. Spivak | Registration No.: 24,913 |
| Signature:  | Date: 3/24/04 |
| Name: C. Irvin McClelland | Registration No.: |

Registration Number 21,124

17497 U.S.PTO
10/80734

032404

Docket No. 250813US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Yutaka OTA

SERIAL NO: New Application

FILING DATE: Herewith

FOR: COMPILER, METHOD OF COMPILING AND PROGRAM DEVELOPMENT TOOL

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

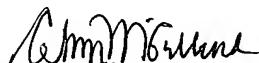
| FOR | NUMBER FILED | NUMBER EXTRA | RATE | CALCULATIONS |
|--|--------------|--------------|-----------------------------|--------------|
| TOTAL CLAIMS | 20 - 20 = | 0 | x \$18 = | \$0.00 |
| INDEPENDENT CLAIMS | 3 - 3 = | 0 | x \$86 = | \$0.00 |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable) | | | + \$290 = | \$0.00 |
| <input checked="" type="checkbox"/> LATE FILING OF DECLARATION | | | + \$130 = | \$130.00 |
| | | | BASIC FEE | \$770.00 |
| | | | TOTAL OF ABOVE CALCULATIONS | \$900.00 |
| <input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY | | | | \$0.00 |
| <input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE | | | + \$130 = | \$0.00 |
| <input type="checkbox"/> RECORDATION OF ASSIGNMENT | | | + \$40 = | \$0.00 |
| | | | TOTAL | \$900.00 |

- Please charge Deposit Account No. 15-0030 in the amount of A duplicate copy of this sheet is enclosed.
- A check in the amount of to cover the filing fee is enclosed.
- Credit card payment form is attached to cover the filing fee in the amount of \$900.00
- The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 3/24/04



Marvin J. Spivak

Registration No. 24,913

C. Irvin McClelland
Registration Number 21,124

Customer Number

22850

Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 05/03)